

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me</i>		<i>04/11/01</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>5-4-01</i>
FORMALITY REVIEW	<i>AM</i>	<i>917</i>	<i>05-11-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	4	✓	2-7-02
2	2	✓	2-7-02
3	3	✓	2-7-02
4	4	✓	2-7-02
5	5	✓	2-7-02
6	6	✓	2-7-02
7	7	✓	2-7-02
8	8	✓	2-7-02
9	9	✓	2-7-02
10	10	✓	2-7-02
11	11	✓	2-7-02
12	12	✓	2-7-02
13	13	✓	2-7-02
14	14	✓	2-7-02
15	15	✓	2-7-02
16	16	✓	2-7-02
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18	18	✓	2-7-02
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25	25	✓	2-7-02
26	26	✓	2-7-02
27	27	✓	2-7-02
28	28	✓	2-7-02
29	29	✓	2-7-02
30	30	✓	2-7-02
31	31	✓	2-7-02
32	32	✓	2-7-02
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36	36	✓	2-7-02
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Best Available Copy

5/11
2-6-17
8-1-01

If more than 150 claims or 10 actions
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